

MAILED PCT/PTO 28 APR 2006

PTO/SB/21 (09-04)

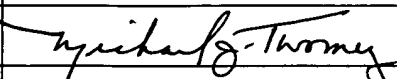
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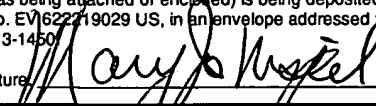
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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/538589-Conf. #9056
		Filing Date	June 15, 2005
		First Named Inventor	Thomas SMITH
		Art Unit	N/A
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	31	Attorney Docket Number	0112981.00125US36

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/ Reply -Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): - Suppl. Application Data Sheet - Copy of Notification of Missing Requirements - Declaration - Power of Attorney - Statement under 37 CFR 3.73(b) - Assignment - Return Receipt Postcard
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WILMER CUTLER PICKERING HALE AND DORR LLP		
Signature			
Printed name	Michael J. Twomey		
Date	April 28, 2006	Reg. No.	38,459

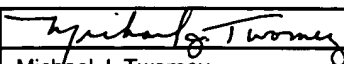
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as Express Mail No. EV622219029 US, in an envelope addressed to: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: 4/28/06	Signature:  (Mary Jo Nispel)

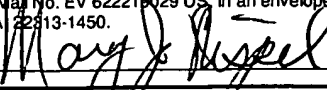
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FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	10/538589-Conf. #9056
		Filing Date	June 15, 2005
		First Named Inventor	Thomas SMITH
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	0112981.00125US36
TOTAL AMOUNT OF PAYMENT (\$) 1,045.00			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>08-0219</u> Deposit Account Name: <u>Wilmer Cutler Pickering Hale and Dorr LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
<u>Fee Description</u>					<u>05/03/2006 GFREY1</u>	<u>00000063 080219</u>	<u>10538589</u>
							<u>Small Entity</u>
							<u>Fee (\$)</u>
Each claim over 20 (including Reissues)			<u>01 FC:2617</u>		<u>65.00 DA</u>		<u>50</u>
Each independent claim over 3 (including Reissues)			<u>02 FC:2615</u>		<u>800.00 DA</u>		<u>200</u>
Multiple dependent claims			<u>03 FC:2616</u>		<u>180.00 DA</u>		<u>360</u>
							<u>180</u>
<u>Total Claims</u>	<u>52</u>	<u>- 20 =</u>	<u>32</u>	<u>x</u>	<u>25.00</u>	<u>=</u>	<u>800.00</u>
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>2</u>	<u>- 3 =</u>	<u>_____</u>	<u>x</u>	<u>_____</u>	<u>=</u>	<u>_____</u>
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
<u>_____</u>	<u>- 100 =</u>	<u>_____</u>	<u>/50</u>	<u>_____</u>	<u>(round up to a whole number) x</u>	<u>_____</u>	<u>=</u>
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							<u>_____</u>
Other (e.g., late filing surcharge): <u>2051 Surcharge-Late filing fee</u>							<u>65.00</u>

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	38,349
Name (Print/Type)	Michael J. Twomey	Telephone	(617) 526-6000
		Date	<u>April 28, 2006</u>

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as Express Mail No. EV 622219029 US, in an envelope addressed to: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
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